Attendees: Eric Wright, Niki Crawford, Kathy Lisby, Amanda Thorton, Richard Vandyke, Barbara Seitz de Martinez, David Bozell, Mary Lay, Marion Greene, Martha Payne, Kim Manlove, Rachel Thelin, Marcia French, Sheila Nesbitt, Jeanette Grissom, Chandana Saha, Harold Kooreman, Ruth Gassman

Eric opened the meeting by reviewing the changes that were made to the strategic plan. Eric indicated that the plan will be sent to CSAP for their review and comments before any additional comments from either the SEOW or the GAC are entertained.

Eric introduced the new epidemiologist, Chandana Saha.

There was no quorum so we were unable to vote on approving the minutes. This is the third meeting without a quorum. If we continue not to have a quorum at the meetings, we will run into problems as no voting can be done. Eric requested that members ask others why they are not coming so that we can figure out what the roadblocks are and get people to start attending.

Eric formally presented the SEOW with the epi profile. I will say that there will be another printing and it has been requested that we add the FSSA logo and that has been done and DMHA will be printing that.

Eric asked everyone to go through epi report to look for gaps or things that they would like to see added. The biggest gap in the report is the absence of county-level data. Eric wants to identify specific county-level data sources and also identify specific county-level patterns. We want to use the county-level data to form a work plan for the next 12 months. One of the things jumping down the agenda to #4d, one of the questions we are going to have to answer in the short run is to help the state identify the communities with the highest need. That will help us encourage people who are in those communities to apply. Eric has gotten a lot of conflicting information about county-level information. Eric asked that team members apply some "peer pressure" to help him get an appointment with the prosecutor's office as the Prosecutor's data is the most current. The biggest complaint of the report is that the data are 2 years old. The GAC was very concerned about the law enforcement perception which is very now focused. It won't however, be available in the public data for at least 2 years. What data can we access in the short term. Eric also wants people to forward him the criticism. We can use the criticism to shape the report next year.

Strategic Plan: I don't know if we want to spend a great deal of time on this. The GAC spent a lot of time talking about this. The place where we are probably the weakest is probably in the area of capacity assessment. Our assessment is descriptive and partly this is because of lack of data. Also it is hard to define capacity. We have started working towards a definition of capacity and we will be working toward this in the next section. I want everyone to feel included in the process so I want to get SEOW's input in the

process. We will not use your comments now but use them when CSAP sends us back their comments. The comments can help make adjustments down the road. Eric indicated that the process will be quite formal, we send them the draft and then they will send us back the comments. We will address the comments with the GAC and then we will respond directly to those comments.

Sheila indicated that a lot of what we will get back is clarification. The reviewer who serves as a proxy for Indiana will come back and ask for clarification because she has to be the one to explain the plan to the larger group who approves it.

Eric said we "walked out on a plank" by having six priorities. It is entirely possible that the CSAP will say "pick one". The trend has been in the other grantees to pick one. For spf-sig funding we will probably have to pick one. If it comes back to us, we will be back in the same position we were before where we have to vote for a specific priority.

Shelia indicated that other grantees have had more than one, but you have to be able to support this.

Kim said that he agrees and stated that the thing that came out of going to the meetings last week in DC is the fact that I began to see that CSAP and SAMHSA are applying the spf process to the grant process. They have gone through the 5 steps essentially with cohort 1 and they have gotten to the point where they are essentially starting over with cohort 2 and tweaking the process, which is what we are all supposed to do. When I got back and looked at the 10000 foot level, it made more sense. There are some good things being in cohort 2 because we have the benefits of what happened in the first cohort and there are some challenges since they have learned some things and they are becoming more proscriptive. Also, their processes are becoming more complex especially on the evaluation side. Kim said that he likes the dynamic process where everything is kind of going on at the same time rather than the linear process of we send it and they approve and it goes on down the line.

Rick indicated that one issue of one or multiple priorities is statewide or local priorities. When we drill down to the local level, there may be a different issue than what is the statewide priority.

Sheila said on the CSAP level they have gone the route that if it is a state level need then you only fund communities where the concern is the same as the state level.

Rick, plan A is to fund those communities where the problems are the state's problem.

Jeannette wanted to know how you "sell this" to the community. Shelia said that the state made the decision and then imposed it on the communities. The RFP cannot be written till the plan is approved so we cannot make determination on the impact of priorities on the RFP until the plan is approved.

Eric indicated that in the conference it was made clear that the block grant is the main source of funds for states and the SPF funds are being used to simply augment what is already happening.

Mary Lay indicated that 6.8 million goes to the communities from the block grant. If you go beyond the block grant dollars in table 3 and 4 you get a sense of how much money is already out there (pages 20 and 21). That is an important way to think about this. In that way, I would not be so devastated if they came back and said choose one.

Eric pointed out that one thing that makes us unique is comorbidity. I think having that chapter in the report is a strong argument for having multiple priorities. The other states that focused most successfully on one priority have not had to go through an RFP process. However, we will have to see what CSAP has to say.

Rick indicated that this is a multi-year process and that it will change over the years. It makes sense in the beginning to focus on one issue and then there is some latitude for that priority to change or shift over the years. If we follow the data and it shows trends then we can have an argument to do that.

Eric responded that there is a strong expectation for us to show how the communities have gone through the five steps. Even if the community is ready to go, they still have to go through the planning process. Even the high capacity organizations will need six months to go through the planning process. In the first year, they will have barely started. If we really want to give them a fair shot, it takes 2 years for a program to mature; the reality is going to be locked into this structure for a while. It will be hard to change trajectory mid term.

Rick followed up by saying that since we have gone through a more comprehensive process can this work product (the epi report) be a guidance document that can be used to address issues with other sources of funding?

Eric said that CSAP would like that because they are encouraging states to use data based decision making. They can use the document for their funding decisions. One reason we want a good representative body on the SEOW is so that there is consensus among state agencies. This may allow some flexibility in years 3 or 4 and then we can use other funding sources when we have more flexibility to respond to those needs. John would like this body to continue beyond the SPF because there are so many data needs. As data increases this is a good way to make decisions.

Jeanette has concerns about comorbidity. If comorbidity becomes the priority, will this have to be what the community is shaped around when they do the RFP.

Kim indicated that one of the ways that they can focus on comorbidity is choosing more than one priority.

Shelia said CSAP is encouraging states to develop logic models to see what intervening variables affect the substance. If you have more than one priority, this will affect your logic model. If you have more than one substance you will have to look at the relationship between all these drugs. The logic model will be a lot more complex and less linear than if you have one priority.

Eric, if you look at it from a public policy point of view, the logic model is very useful so you have one cause and its effects. We need to understand how co-occurrence occurs. This may be affected by multiple things so you need to address multiple causal factors. There is a bias in public policy for a simple explanation even if it is not a complete explanation.

We want to say that multi-substance use is a serious problem in Indiana across the board. We have not talked about this in any other forum and maybe we should. You cannot just do alcohol prevention. This is a data-driven priority and we should be addressing this.

Shelia said there is one plan that was just submitted, Illinois', where communities will have the opportunity to do more than one priority. They have a fairly complex set of priorities, multiple indicators, multiple cohorts, and a more complex logic model.

Eric indicated that we have not addressed the cohort model, but perhaps we should discuss that in case comments come back about cohorts.

Marcia French pointed out an issue with the plan which speaks to some funding streams. She will make that correction.

Martha pointed out another funding issue which Dave Bozzell clarified. It was decided that this was not necessary to change in the strategic plan.

Eric requested that the group take some time to look at your area of expertise in terms of the plan and send concerns about the report to Marcia so they can be worked through in the next phase.

Eric asked for more questions about the state plan.

Kathy asked about the definition of capacity and said that later on you talk about on page 36 you are talking about the self-rated level of capacity and then you talk about low capacity and high capacity and I don't find any definition of what that is. If I were a community trying to rate myself, I would want to have guidance on how to rate myself.

Eric indicated that there are four bullet points that we were using to define capacity. This is an administrative definition. There are 2 ways to look at capacity, administrative funds, people etc. We didn't want to get more specific about how much funding, how many computers, etc., because we wanted to allow communities to make their case. We wanted the plan to be as wide as possible so we don't overly restrict it.

Another way of thinking about capacity is receptivity of communities to prevention programming generally. You don't want to dump a lot of money into a community if it is going to ignore it. We did not really address the community readiness issue because we were not aware of any state data that spoke to where communities are. Eric and Marion are going back and forth to figure out how to address that. The CRI is from the Triethnic Center. These are various things we could use to gather that information. We are looking at these instruments so that we can distribute this to communities (which we are currently defining as counties) because it is the only reasonable state-level definition of community. As an initial bird's eye view of the state, we would do this on an annual basis, interview a select sample over the web, identify key stake holders, get a call or email for a web- based survey. One, you would expect if the spf-sig is improving capacity readiness you should see growth in those indicators at the county level. You can also define capacity at an organizational level. The IPRC has developed a database of organizations which are doing prevention. The issue that has always eluded me is community readiness. CSAP says it is important but they do not give us guidance on how to do this.

Rick said the number of people served, number of FTEs could also be a measure of capacity. If you are going to the trouble of doing the survey you might as well ask that question. Eric thought that was a very reasonable idea.

Martha indicated that there is a staffing survey done by DMHA which might be of use.

Eric indicated we wanted a nice balanced view of the prevention system so we probably will not want just government personnel. This survey could be quite expensive to do but the web seems to be the most reasonable, feasible, low cost survey. It may be statistically problematic.

DOJ community capacity development office may be able to provide a model that we can use. It may be somewhat corrections-oriented but it could be a good starting point.

Eric asked Barbara if she had any suggestions. Ruth indicated the instrument from Texas Christian. They have several questionnaires. They focus on several factors of readiness such as evidence-based practice, structure.

Barbara indicated that Western CAPS has very specific questions for capacity and it has questions that are very relevant.

Eric indicated that we looked at those but didn't think those were terribly helpful.

One person suggested that we include an organizational capacity instrument in the RFP that communities would complete as part of the process and we could then use it as a tool for making judgments on capacity. We can at least use that to make decisions about grant applications. Marcia indicated that all communities may rate themselves high so they get money. Eric said they may not know what we are looking for. We could use this in the TA process to help communities think through their organizations and it may

help identify those communities that are high and low so we can use that later for the partnering process.

Barbara had a question about cultural competency, page 36. Where does cultural competency come into play in the review of the applications and the work of the community developing their proposals? This seems to indicate that cultural competency comes into play in how they will implement the grant not the award process. The question is whether it ought to be relevant in an earlier stage, for example in the formulation of the proposal itself, the grant writing and the evolution of proposal.

Eric said that this will be a criterion for evaluation of the proposals. It may be misleading just because of the layout. Cultural competence and sustainability will be factored in the review process. We may need to add that issues of cultural competence need to be expressed in all areas of the SPF process, not just the design. We should add something in the strategic plan that cultural competence needs to be addressed in all areas of the planning process, sustainability, data based decisions.

The way this will work, when CSAP approves us, the training and outreach committee will work with the IPRC to have meetings for potential applicants to provide technical assistance before the applications are due. Then there will probably a training provided by Central CAPS to the grantees on the planning process. When they are planning they get assistance.

Ruth indicated that this was the first she heard of technical assistance from IPRC and they would like to be involved in this process. Ruth and Barbara would like to have a role in the planning process of the technical assistance. They have a whole crew who would like to do this.

John and CSAP have now clarified that they need to put in their budget both a mentor and money to do an evaluation locally. We are not going to be able to do the individual counseling and technical assistance--that would be too expensive. The communities would pay money out of their budget to IPRC for technical assistance. They have to contract with a local entity in order to evaluate. You might have communities to work with already and there might be other communities that they would like to do that. The evaluation does have to follow the required rules.

Marcia indicated that on the list serve we pulled from the first SPF and developed a number of lessons learned and we looked at that in the evaluation group. The communities said that this was a big issue (the evaluation). In the RFP we will be up front with what the communities need to know about their obligations. That way they can figure out if they have the capacity to do the required data collection and maybe they want to go for a capacity building grant first.

Ruth wanted to know what the timeline was for the RFP. Marcia indicated December. Eric indicated, however, that we should not plan on that for certain as the CSAP could come back with a lot of criticisms that we will need to address. We could get stuck in a

holding pattern until Spring since we cannot go forward without an approved plan. Kim indicated that Marcia is moving ahead with roughing out the RFP. Ruth asked when that will be ready. Marcia said we can do nothing until we get approved. Marcia said they are asking us to pick up the speed but at the same time they don't have the staff to pick up speed on their end (CSAP's). Ruth wanted to know what the year is for the grant (when does it start on calendar). Marcia/Eric indicated that we are in the second year but we will get a no cost extension for a sixth year. Sheila was not sure when the year started. Kim was thinking it was in July. Was thinking more in terms of the governor's office did not start the process till about a year ago and then of course the committees did not get selected until about December. They had their first meeting officially in February; it was early in the second year then. We are in the front end of cohort 2. The pressure is to get cohort 1 out and we might be able to ride the wave and get reviewed more quickly. Ruth said the earliest support would be to help communities prepare to respond to the RFP. Marcia thinks we can start planning on technical assistance now so that when the RFP comes, we are ready to jump with helping communities. Barbara thinks that we need to make sure IPRC can meet demands along with its other responsibilities so the funding from evaluation will be valuable.

Eric wanted to know how IPRC will be paid for the process of technical assistance. Marcia said that each community funded will have a portion that they pull out for training; Kim clarified that this was for evaluation and not for training.

Shelia indicated that part of the way that they have solved 85%/15% split have looked at what communities need and funded that through the communities, in other words, this is required in the budget piece and that way communities are paying for their own evaluation and training and the state is not pre-determining this.

Kim said that we have the plan and we will go back and fourth on that. The RFP also needs to be approved by the state but we will have to go back and fourth on that. It is an equally challenging bureaucracy with DOA. We do have the state and federal systems which have these delays built in them. That is why have tried to get this plan out first because we know that there will be this time. The focus now will also begin to shift to the RFP development. As soon as we can get that in shape then we can start getting DOA involved. DOA's process is a lot more prescriptive. CSAP is making it up as they go along. Part of the SPF strength is that the parameters are looser; the DOA has parameters are more set in stone.

Ruth wanted to know the goal we had of getting the RFA to DOA. Marcia said that it would be by January or sooner, if possible. Eric thinks we can get the RFP to DOA in a week from approval. We are working ahead even without approval because we got comments from the conference. The caution is what the revisions will be and what the GAC will have to say. That will be a difficult process because it is a large group and it could take us a while to work through that.

Eric asked for further thoughts on capacity. We are going to move forward to do that data collection as soon as possible. We will provide more information on counties on the

website as we get it. The most important piece will be rankings of counties. Counties have to have information so they know where they are in areas of need. We will have this out before the RFP goes out so counties can do preplanning. We will stick with the priority structure which we have established but that requires we collect more community-level data. Chandana and Eric will work out a plan of datasets that we can access relatively easily to give community profiles. Shelia wanted to know if we will be giving just broad rankings of use or need or rankings more specifically on the priorities. Outcome indicators and allocation process went into determining goals. We will try and also present indicators across counties. We want counties to think about what the issue is and what may be causing the issue in a particular county. A mix of the highest prevalence and the highest causal factor. Counties may know more about what is going on their area and when they apply they can say that this is the causal factor driving the problem. Sheila said some states have used a complex algorithm to determine high need and it is very clear which indicators are used to rate the community in that area. Sheila questioned if our determinations be like this or a more comprehensive picture where we provide our data and combine the community's data. Eric said that the latter is what is implied in the plan. Not sure if CSAP will like it. Eric also doesn't know how much data counties collect or transmit into the sources that we will ultimately be able to get. The ranking of the counties was brought up as an issue when meth project got started. Due to data there is concern if counties show up as having a problem do they really have a problem or are they just keeping better data. Eric also indicated that people who collect the data can affect how the data is collected like states where coroner is Catholic, you have more suicides. With meth, if the sheriff is more meth-oriented then they will have more meth-skewed data. If we want to be data savy, we need to acknowledge that is a limitation of the data.

Rick indicated that Medicaid solves some of the problems because it is reliable state-wide data. It is treatment data, however, so you have use versus treatment issues. Also the Medicaid data is not a consistent population across the state. However, you can weight it. You can rely on Medicaid, however, you have to think about how to weight that information within specific counties. Eric indicated that that is how academics approach it, if you have multiple data sources that show high rates even if they are collected differently, and then you can say something is going on. We will try and tell the counties to make a strong case by including as many indicators as possible. The data they collect will really affect the decisions they make down the road.

Shelia indicated this may be an area where there could be request for clarification. Such as what process you used to determine high need.

That is all for community-level data and that is the short term plan. If you have anything you help us with to speed the process along, let us know.

We did get some clarification on the NOMS. They back pedaled a little bit and said that we only need to collect NOMS related to our data collection process. There was a meeting with Eric, Paula, and John indicated the NOMS will be a standard assessment process and we are not following CSAP's guidance. We think the block grant will

require NOMS and Mary indicated that they are now required for the block grant. One of the challenges Paula and I talked about in that meeting is that we are going to require as an internal evaluation that they collect complete NOMS on all the clients they serve. This will not be a statewide thing. How do we start collecting NOMS data from the other communities throughout the state? I want to start working with Paula to start getting that process in place. We want to have a web based system where communities could send this and we could provide reports and so on back to the communities and then we can also send it to Paula to do with it what she needs. Paula and I are of like mind on getting block grant NOMS but SPF will be sending it at program level. NOMS are not currently required at the program level for the state. We will have a web-based system, not sure what it will look like at this point but I think it will be pretty neat. Mary wanted to make sure it will be a secure database. Eric indicated he was not sure of the technical issues because of what is coming down the pike from CSAP since they may have a web-based system for some of their data. Data collection will include federally required data, state required data, and the third part will be data for the state-wide evaluation. We need to have data to show that the program was effective. We will have to work with communities to determine what variables they can use to show if the program is effective. We want to maximize ability of community to show effect of their program.

Ruth wanted to know at what stage the evaluation team negotiates with the community on the appropriate variables for the evaluation. Eric said during the planning process. After picking an appropriate intervention and proposing how they would do that and how they would evaluate it in their application, communities would then go through their SPF process and at that point they would get technical assistance to refine that. Ruth clarified that when they go to do their strategic plan, they are already funded. How well they propose what they are going to do will be a factor of capacity and how ready they are to get money.

Ruth wanted to know if there will be specific restrictions like having to use comparison groups and things like that. Eric reported that no, that would not be required. Comparison counties will be suggested as long as comparison counties will not be required to collect any additional data. Ruth clarified that communities will not be required to do that; it will be done at the state level. However, communities can propose to do that.

Mary wanted to know if we have something in the by-laws that if you miss so many meetings you will be removed. Shelia thinks it was something like you will be considered for dismissal if you miss 2 meetings within a certain time or something like that. Eric said we will do an attendance review and let people know about the by laws.

Eric asked Marcia to send out meeting dates to everyone so they can send back any issues.

Next meeting November 17th, 9-11.